

Comprehensive Homebased Services Q&A Webinar 12/10/12

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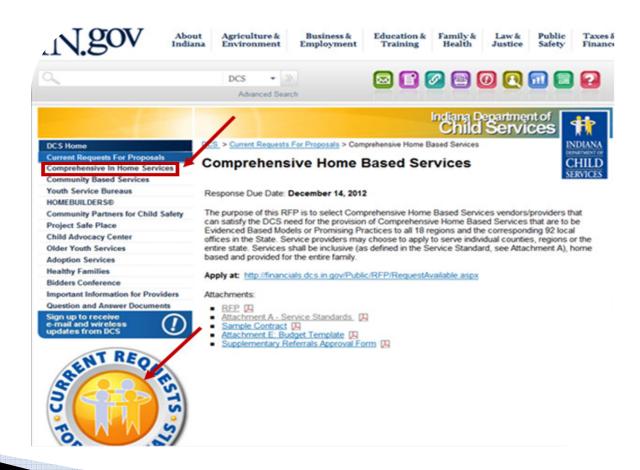
Objective of Webinar

- Review of pertinent information regarding the RFP
- Provide additional information
- Some clarification needed
- Update on changes



Comprehensive Services RFP

http://www.in.gov/dcs/3395.htm





RFP Submission Date

- 1/31/13
- Intermittent contract start dates



Goal of Comprehensive Homebased Services RFP

- To encourage the use of Evidence Based Practice in the home based service array.
- To offer increased flexibility in serving families by providing a per diem payment.



Extension of Community Based Contracts

- DCS plans to extend the current community based contracts for an additional two years.
- A provider that is already contracted for Homebased services/services, can continue to provide services under those contracts and claim for payment under the hourly payment structure.
- But, If a provider wants to move to the per diem structure and is able to provide services as outlined in the Comprehensive RFP, then a proposal for Comprehensive HB Services will need to be submitted.



Comprehensive Service Defined

In- Home Family Centered Services provided using Evidence Based Practice and/or Promising Practices.

Examples:

- Abuse-Focused Cognitive behavioral Therapy (added)
- Trauma-Focused Cognitive Behavioral Therapy,
- Cognitive Behavioral Therapy,
- Functional Family Therapy,
- Multi Systemic Therapy,
- Family Centered Treatment,
- Motivational Interviewing,
- Brief Strategic Family Therapy
- Child Parent Psychotherapy, OR
- Other DCS approved treatment models



Comprehensive Defined

- Given the dynamic range of evidence-based models and promising/research-informed practices that may fall under this service standard, there may be some variation in what is considered outside the "all inclusive" services.
- The service shall be all inclusive to meet the needs of the family. There should not be a need for DCS to refer the child(ren) or family services below.
- Must include:
 - Assessment of service need,
 - Homebased Therapy- Now Optional
 - Homebased casework
 - Homemaker/Parent Aid
 - Visitation supervision,
 - parent engagement
 - Parent éducation
 - transportation assistance.



Addition to Qualifications

- Paraprofessional staff may be used to supplement the professional staff when approved as part of the model or a supplement to the model. These staff must be trained in the basic principles of the chosen model and their practice must be coordinated and directed by the direct professional staff.
- When treatment/service models chosen and/or Indiana licensure/certification bodies require a higher level of staffing qualifications than above, those qualification requirements shall be followed.

Example: Visitation Supervision and Transportation



Examples of Proposals

- The direct worker is a Bachelors level staff providing home based services utilizing Motivational Interviewing. The staff provide all home based services needed by the family (including any visitation supervision and transportation needs). Therapy would not be part of this service.
- The direct worker is a Masters level staff providing TF-CBT and/or Motivational Interviewing when appropriate. In addition, all other home based services are provided (including any visitation supervision and transportation needs). These additional services may be provided by staff other than the direct worker.
- The direct worker is a Masters level staff providing Family Centered Treatment. Non-therapeutic services (i.e., transportation)may be provided by staff other than the direct worker.
- Other EBPs may be proposed as defined in the service standards.



Assessment Period/Service Period

The provider will first receive a referral for an assessment. That assessment will be to determine if the family is appropriate for the service. Once the family has been determined to be appropriate for the service, a second referral will be made for the service. Services will not be billable until after the assessment has been completed and the service referral has been created. After that time, the per diem is billable beginning the first face-to-face contact with the family and continuing until the last face-to-face contact with the family prior to the service ending or case closure. The rate will be paid every day regardless of whether or not there is face-to-face contact with the family.



Medicaid

- Outside of Comprehensive Services
- No plan for additional RFP to capture Medicaid billing ability under comprehensive services.
- DCS has determined that the services that are provided under this service standard are not appropriate to be billed to Medicaid—Clinic option because they are not provided in a clinic setting. Some services may be billable through Medicaid Rehabilitation Option, however, DCS does not plan to refer MRO eligible children to the Comprehensive Home Based Services. It was determined that in most cases these children, would be best served through MRO by the Community Mental Health Centers.



Per Diem Rate

- Must contain costs included under Comprehensive definition per model, supervision, administration, 24/7 on call, ongoing training costs.
- Quality Service Review participation
- Training
- Assessment
- Respite, concrete services <u>not to be</u> <u>included</u>



DCS Supported training

- Family Centered Treatment (FCT)
- Trauma-Focused Cognitive Behavioral Therapy
- Motivational Interviewing



Budget- Training

Family Centered Treatment: DCS will pay for the cost of training and consultation/quality assurance for this contract period (through 6/30/15). The provider will be responsible for licensing costs and IT costs. (Total for licensing and IT costs that must be paid to FamiliFirst as part of the contract between the Indiana provider and FamiliFirst will be \$8,600 per year\$5,000 for licensing and \$3,600 for IT)

Trauma Focused Cognitive Behavioral Therapy: DCS will provide several training opportunities for service providers throughout the next 2 years. These trainings will be open to a wide array of service providers. The number of trainings offered will be determined after proposals are selected for contracting. Ongoing additional training should be built into the per diem rate. Any required consultation and model fidelity quality assurance should also be built into the per diem rate. DCS will not pay for the staff time or travels costs to attend this training outside of the per diem.

- Motivational Interviewing: DCS has sponsored several trainings on Motivational Interviewing during 2012. DCS will continue to provide some training into 2013 for providers selected through the RFP process. Providers who are unable to attend the DCS sponsored training will need to ensure their staff is trained in MI by a DCS approved MI trainer. The cost of maintaining trained staff should be included in the per diem rate. DCS will not pay for the staff time or travels costs to attend this training outside of the per diem.
- Other EBP trainings not supported by DCS should be built into the per



Budget

- Per diem equation
- Regional Breakdown
- Inclusion Chart



Questions?

